



## NOTICE OF TERMINATION (NOT) for Concentrated Animal Feeding Operations Under AZPDES Permit No. AZG2004-002

**TO TERMINATE COVERAGE OR RESPONSIBILITIES OR IF THE AFO IS NO LONGER A CAFO, A COMPLETE AND ACCURATE NOT MUST BE FAXED TO (602) 771-4505 OR SUBMITTED TO:**

**CAFO Program- Water Quality Compliance Section/ CAFO NOT**  
Arizona Department of Environmental Quality  
1110 West Washington, 5415B-1, Phoenix, Arizona 85007

**I. CAFO General Permit Authorization No:** AZCAF-

### **II. REASON FOR SUBMITTING NOT: (Check One)**

- ☐ 1. Operation no longer meets the definition of a CAFO at Arizona Administrative Code (A.A.C.) R18-9-A901(6). All manure, litter and wastewater generated at the time the operation was a CAFO have been disposed of and there is no potential for discharge of that manure, litter, or wastewater to waters of the United States.
- ☐ 2. Operator no longer operates the CAFO. New operator is: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Date: |\_\_|/|\_\_|/|\_\_| Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ (New operator must submit an NOI within 30 days of purchase.)
- ☐ 3. Owner no longer owns the CAFO. New Owner is: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: |\_\_|/|\_\_|/|\_\_| Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ (New owner must submit an NOI within 30 days of purchase.)
- ☐ 4. Operation ceased. All manure, litter and wastewater generated at the time the operation was a CAFO have been disposed of and there is no potential for discharge of that manure, litter or wastewater to waters of the United States.

### **III. OPERATOR INFORMATION: (As Noted On Authorization Or In Most Recent Update)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Business Name \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: |\_\_|/|\_\_|/|\_\_| Zip Code: \_\_\_\_\_

### **IV. OWNER INFORMATION: (As Noted On Authorization)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Business Name \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: |\_\_|/|\_\_|/|\_\_| Zip Code: \_\_\_\_\_

**V. CAFO INFORMATION**

CAFO Name: \_\_\_\_\_ Phone: \_\_\_\_\_

CAFO Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

If the operation is still operating but does not meet the definition of a CAFO as described in Section II.1. of this NOT, provide the type and number of animals confined at the AFO (breakdown swine count by number < 55 lbs and number = 55 lbs):

Type of Animal	Max No. in Open Confinement	Max No. Housed Under Roof
TOTAL:	TOTAL:	TOTAL:

**VI. CLOSURE PLAN**

The permittee submitted a closure plan meeting the requirements in A.A.C. R18-9-D905(A)(2) to ADEQ on: \_\_\_\_\_

The permittee fully implemented the closure plan on: \_\_\_\_\_

The permittee notified ADEQ of the implementation of the closure plan on: \_\_\_\_\_

**VII. CERTIFICATION BY AUTHORIZED SIGNATORY (PER PART VIII.K.1 OF THE PERMIT)**

*"I certify under penalty of law that all CAFO discharges from the identified facility that is authorized to operate by a general permit have been eliminated or that I am no longer the owner or operator of the facility. I understand that by submitting this Notice of Termination, I am no longer authorized to operate the CAFO under AZG2004-002, and that the discharge of CAFO pollutants from the CAFO to waters of the United States is unlawful under the Clean Water Act and Arizona Revised Statutes where the discharge is not authorized by a NPDES or AZPDES permit. I also understand that the submittal of this Notice of Termination does not release an owner or operator from liability for any violations of AZG2004-002 or the Clean Water Act."*

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

April 16, 2004